

FO4 0000001669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

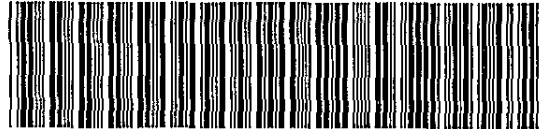
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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02/25/04--01025--005 **78.75

FILED
04 MAR 22 PM 01:41
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

FO4-1669
2004
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SCB COMPANY, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

BRADLEY D. STOLLER
(Name of Person)
SCB COMPANY, INC.
(Firm/Company)
545 65th STREET SOUTH
(Address)
ST PETE, FLORIDA 33707
(City/State and Zip code)

For further information concerning this matter, please call:

BRAD STOLLER at 727 946-2723
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☒ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

24 MAR 13 AM 8:41
RECEIVED
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 5, 2004

BRADLEY D. STOLLER
545 65TH STREET SOUTH
ST. PETE, FL 33707

SUBJECT: SCB COMPANY, INC.
Ref. Number: W04000009074

We have received your document for SCB COMPANY, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days, or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 704A00014929

CLM 23 MAR 2004

FILED

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. SCB Company, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

ESCB Company, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. IOWA 3. 42-1519929
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. MAY 2001 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification."
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 545 65th STREET SOUTH ST PETE, FL. 33707
(Principal office address)

SAME AS ABOVE
(Current mailing address)

8. MARINE SALES
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

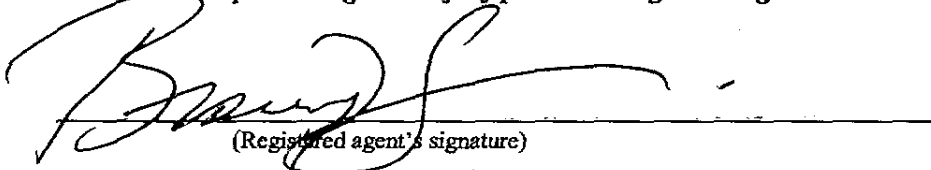
Name: BRADLEY D. STOLLER

Office Address: 545 65th STREET S.

ST PETE, Florida 33707
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ON MAR 23 AM 8:41

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A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

* Director: Bradley D. Stoller

Address: 545 65th STREET S.

ST Pete, FL 33707

Director: _____

Address: _____

B. OFFICERS

* President: SAME AS ABOVE

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. BRADLEY D. STOLLER / president's director

(Typed or printed name and capacity of person signing application)

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MAR 23 AM 8:41
TALLAHASSEE, FLORIDA

IOWA

Date: 02/16/2004

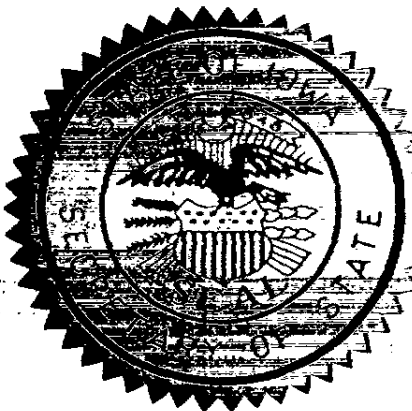
SECRETARY OF STATE

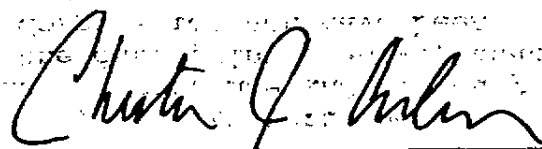
490 DP-000253168
SCB COMPANY, INC.
STOLLER & JOHNSON ATTORNEY AT LAW
ATTN:LARRY STOLLER
PO BOX 441
SPIRIT LAKE, IA 51360

CERTIFICATE OF EXISTENCE

Name: SCB COMPANY, INC.
Date of Incorporation: 05/16/2001
Duration: PERPETUAL

I, CHESTER J. CULVER, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify that the corporation named on this certificate is in existence and was duly incorporated under the laws of Iowa on the date printed above, that all fees required by the Iowa Business Corporation Act have been paid by the corporation, that the most recent biennial corporate report has been filed by the Secretary of State, and that articles of dissolution have not been filed.




CHESTER J. CULVER SECRETARY OF STATE